IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of:

Bruce G. LINDSAY et al.

Serial No.: 09/757,431

Filed: January 10, 2001

Date: November 5, 2003

Confirmation No.: 8483

Group Art Unit: 2172

Examiner: Ly, Anh

For: EFFICIENT INDEX-DATA FETCH VIA CALLBACK FOR TABLE DATA

Mail Stop AF
Commissioner for Patents
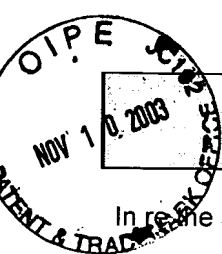P.O. Box 1450
Alexandria, VA 22313-1450

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RESPONSE AFTER FINAL OFFICE
ACTION UNDER 37 CFR 1.116

Sir:

In response to the Final Office Action dated August 6, 2003, Applicants submit the following remarks:

Remarks/Arguments begin on page 2 of this paper.

TRANSMITTAL FORM

	Attorney Docket No.
	CA920000014/1851P

In re the application: **Bruce G. LINDSAY et al.**   Confirmation No.: **8483**

Serial No: **09/757,431**   Group Art Unit: **2172**

Filed: **Jan 10, 2001**   Examiner: **Ly, Anh**

For: **Efficient Index-Data Fetch Via Callback for Table Data**

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ENCLOSURES *(check all that apply)*			
■ Amendment/Reply	☐ Assignment and Recordation Cover Sheet	☐ After Allowance Communication to Group	
■ After Final	☐ Part B-Issue Fee Transmittal	☐ Appeal Communication to Board of Appeals and Interferences	
☐ Information disclosure statement	☐ Letter to Draftsman	☐ Appeal Communication to Group *(Appeal Notice, Brief, Reply Brief)*	
☐ Form 1449	☐ Drawings	☐ Status Letter	
☐ (X) Copies of References	☐ Petition	■ Postcard	
☐ Extension of Time Request *	☐ Fee Address Indication Form	☐ Other Enclosure(s) *(please identify below):*	
☐ Express Abandonment	☐ Terminal Disclaimer		
☐ Certified Copy of Priority Doc	☐ Power of Attorney and Revocation of Prior Powers		
☐ Response to Incomplete Appln	☐ Change of Correspondence Address		
☐ Response to Missing Parts	*Extension of Term: Pursuant to 37 CFR 1.136, Applicant petitions the Commissioner to extend the time for response for xxxxxx month(s), from to .		
☐ Executed Declaration by Inventor(s)			

CLAIMS					
FOR	Claims Remaining After Amendment	Highest # of Claims Previously Paid For	Extra Claims	RATE	FEE
Total Claims	57	57	0	$18.00	$ 0.00
Independent Claims	12	12	0	$86.00	$ 0.00
				Total Fees	$ 0.00

METHOD OF PAYMENT

☐ Check no. _____ in the amount of $ _____ is enclosed for payment of fees.

☐ Charge $ _____ to Deposit Account No. _____ (Account Holder Name) for payment of fees.

■ Charge any additional fees or credit any overpayment to Deposit Account No. 09-0460 (IBM Corporation).

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Attorney Name	Joseph A. Sawyer, Jr., Reg. No. 30,801
Signature	
Date	November 5, 2003

CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop AF, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on this date:
November 5, 2003

Type or printed name	Grace Alicea
Signature	